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1. Identification of Interstate Claimants

a. The claimstaker should first determine whether the claimant should file an interstate claim.

b. The first question that should be asked of all claimants is "have you filed a claim against any State in the past year?"

(1) If the answer is "yes", the claimstaker should ask the claimant to provide information from the monetary determination issued by the Liable State against which the claim was filed. From the monetary, the claimstaker will be able to identify the liable State, the date of the claim, the benefit-year ending date, and the weekly and maximum benefit amount of the claim. Once the liable State is identified, the status of the claim can be obtained by using the Interstate Benefit Inquiry (IBIQ).

(2) If the answer is "no", the claimstaker should ask the claimant about his/her work history for the past two years and explain all claims options **including whether or not separations during the base period or lag period can affect eligibility** (such as whether or not a State adjudicates all base period employers or the last 30-day employer, etc.).

c. One of the main factors which will determine the type of claim to be filed is the order of liability as described in Section I.3 of this handbook. The type of claim to be filed may be identified as an intrastate or interstate claim.

(1) If a benefit year exists in another State and benefits are exhausted, terminated, postponed for an indefinite period (any suspension/postponement that cannot be satisfied by the passage of time or last for the remainder of the benefit year), or are affected by the application of a seasonal restriction, the claimant has an option to file an initial claim against another State.

(2) If a benefit year exists in another State and benefits are not exhausted, terminated, postponed indefinitely or for the remainder of the benefit year or affected by the application of a seasonal restriction, the claimstaker should determine and explain the options to the claimant and take a new intrastate or interstate (including additional or extended benefits) claim, as appropriate, or provide the claimant with the

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appropriate telephone number if the liable State takes interstate claims by telephone.

d. If the potential liable State has implemented telephone intrastate initial claims, the claimstaker should determine if the claimant has established a history of being a commuter and intends to continue to seek work in the liable State. If so, the claimant should be advised to file directly with the liable State under intrastate procedures (since the claims filing procedures no longer place an excessive travel or cost burden on the claimant).

2. Type of Interstate Claim to be Filed. When it is determined that an interstate claim should be filed, the claimstaker must determine the type (new, transitional, additional, or reopen) of claim needed.

If the Agent State erroneously takes the wrong type of claim, the liable State should not penalize the claimant. The liable State should make every effort to use the claim received as the claim required. For instance, if a new claim is required, but the Agent State submits a reopened claim, such claim should be processed, if possible, as a new claim. This should not be done indiscriminately and the claimant should be contacted (by telephone, if possible) to determine if a new claim against that Liable State is the claimant's choice. This is especially important when the claimant has employment in more than one State and may prefer to file against another State or a combined wage claim.

Claimstakers in Agent States should understand the definition and purpose of the types of claims in order to submit the proper type of claim to the Liable State.

Under the interstate system, the four types of initial interstate claims filed in the Agent State offices are:

a. New. A new claim is the first interstate claim filed by a claimant to establish a benefit year against a Liable State and it serves as a request for a determination of eligibility. An interstate claimant may have as many "new" claims as there are different States against which he/she claims benefits in succession. In this way, an interstate claimant differs from an intrastate claimant who may normally file only one new claim or establish only one benefit year under a single State's law within a one year period.

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The interstate claimant can establish a benefit year in a State even though a benefit year exist in another State. However, when an interstate claimant's eligibility is determined or is pending with a given Liable State, claims can be filed only against that State (see Order of Liability, Section I (3)) until an ineligible determination is issued or benefits have been exhausted, terminated, or postponed for an indefinite period.

b. Transitional. A transitional interstate claim is a claim filed to request a determination of eligibility and establishment of a new benefit year having an effective date within the 7-day period immediately following the prior benefit year ending date and a week for which credit was claimed against the same Liable State. This type of claim is marked as "new" by the Agent State.

c. Additional. An additional interstate claim is a claim filed by an interstate claimant within the existing benefit year established by the Liable State after a break in the continued claims series due to intervening employment.

d. Reopen. A reopened interstate claim is a claim filed by an interstate claimant within the existing benefit year, established by the Liable State, after a break in the claims series that was not caused by intervening employment. This designation is also to identify the first claim filed in a new Agent State within the existing benefit year when there was no intervening employment.

3. Order of Liability of States. The order of liability of States is governed by Section 4 (revised effective July 5, 1953) of the draft regulations provided to all States in consultation with the Interstate Conference of Employment Security Agencies to implement the Interstate Benefit Payment Plan. Section 4(a) reads as follows:

"Benefit Rights of Interstate Claimants--

(a) If a claimant files a claim against any State, and it is determined by such State that the claimant has available benefit credits in such State, then claims shall be filed only against such State as long as benefit credits are available in that State. Thereafter, the claimant may file claims against any other State in which there are available benefit credits.

For purposes of this regulation, benefit credits shall be

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deemed to be unavailable whenever benefits have been exhausted, terminated, or postponed for an indefinite period or for the entire period in which benefits would otherwise be payable, or whenever benefits are affected by the application of a seasonal restriction."

A claimant can file against any State in which he/she has benefit credits available, provided he/she has not established a "current benefit year" previously through the filing of an intrastate or an interstate claim.

A claimant who establishes a current benefit year in the State where he/she is, or in another State, must continue to file against such State until benefit credits are exhausted, terminated, or postponed for an indefinite period or for the entire period in which benefits would otherwise be payable, or unless benefits are affected by the application of a seasonal restriction. Thereafter, if he/she has available benefit credits in one or more other States, the claimant may choose the State against which he/she will file a new claim.

A claimant must choose the Liable State at the time a new claim is filed. Continued claims should be filed only against such State until the claimant is eligible for a new choice by reason of one of the above situations. (See Section I Item 16 for the procedure to be followed if the chosen Liable State determines the claim to be invalid.)

When a claimant is interviewed on his/her choice of Liable State, the interviewer should consult the Handbook for Interstate Claimstaking to determine the current base periods in the potentially Liable State to compare the claimant's work history.

"Current base period" means the base period applicable in the potentially Liable State for claims filed with the effective or filing date of the new claim. The advantages and/or disadvantages of choosing certain types of claims or a particular Liable State should be fully explained, such as: all base period separations adjudicated in some States versus only last separation in others, etc.; in some States the base period changes every week (52-week period before effective date of claim), in others the change occurs when the effective date falls in a new quarter. There are a number of States that also have alternate base periods. These variables can affect eligibility; so, it is important that the claimstaker consider them when advising the

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claimant of the available options.

The second paragraph of the regulation quoted above describes the conditions, in addition to exhaustion of benefits and cancellation of wage credits, under which benefit credits become unavailable in a Liable State so as to entitle the claimant to select another Liable State. Among such conditions are seasonal restrictions and disqualifications for an indefinite period or for the entire period for which benefits would otherwise be payable.

Seasonal restrictions usually stipulate calendar dates between which individuals who have earned benefit credits in an industry classified as "seasonal" are not eligible to receive benefits. For example, some States bordering on the Great Lakes classify the lake-shipping industry as "seasonal." As a result, claimants who earned all, or substantially all, of their benefit credits in that industry in a Liable State having such seasonal provisions may be ineligible to receive benefits during a stipulated period during which the lake-shipping industry does not operate due to climatic conditions.

Seasonal provisions of State laws are in the Handbook for Interstate Claimstaking. If it seems probable that the claimant's benefit rights will be restricted by the seasonal provisions of the State against which he/she chooses to file, the Agent State should discuss seasonal provisions with the claimant, but should not predetermine their applicability to the claimant.

Some types of seasonal restrictions have the effect of reducing the claimant's weekly benefit amount during the off season. For example, some provisions limit the use of wage credits earned in a seasonal industry during the season to periods of unemployment in the season; such wage credits may not be included in the computation of a claimant's benefit amount in the off season. If a claimant's benefit rights are adversely "affected by" a seasonal provision, he/she should be allowed to choose a new Liable State.

If a disqualification is imposed on a claimant, consideration must be given to the type of disqualification to determine if the claimant can exercise his/her right of free election again. If the disqualification is for a fixed period, claims may not be filed against another State. An example of this type of disqualification is one imposed "for the week in which the disqualifying act occurred and for the five weeks of unemployment

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immediately following." On the other hand, if the disqualification is for an indefinite period, such as "for the duration of unemployment" or "until the claimant has had earnings of at least ten times the weekly benefit amount," the claimant can file against another potentially Liable State if the requalifying requirements have not been met.

When a claim is filed against a State, after a denial or postponement by a previous State, all facts on actions by the first State should be reported to the State of the claimant's second choice.

4. Recording Order of Liability on Claim Record. If the claimant has already exhausted his/her benefits or has had benefits otherwise terminated by a State, it should be noted on the initial claim and Claim Record. Notations such as the following should be used:

"Claimant has exhausted benefits from _____,"

"Benefit year terminated on claim filed against _____,
copy of determination and full statement of facts attached."

"Future benefit rights canceled by State of _____,
copy of determination and full statement of facts attached."

"Benefit credits unavailable in the State of _____,
because of application of a seasonal restriction."

5. Claim Filing Methods. The following methods are used in filing new, transitional, additional, reopened, and continued claims:

a. New and Transitional Interstate Claims

(1) New interstate claims and transitional claims are filed on the Initial Interstate Claim, Form IB-1 (and Interstate Claim Record Card, Form IB-1A, if used by the Agent State). Many States maintain computer claim records instead of hardcopy records.

(2) Questions on the form, except items A-M and items 18-20, are designed for self-filing by the claimant.

(3) Instructions should be given to the claimant which explain the information desired and a large print poster of the

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form with instructions should be placed where the claimant can view it while filling out the form.

(4) Self-filing is recommended to allow the claimstaker to use the claimant contact time on more substantive phases of claimstaking, such as obtaining answers to special procedural questions requested in the Liable State's section of the Handbook for Interstate Claimstaking.

(5) Under the self-filing method, the claimstaker is just as responsible for the accuracy, reasonableness, completeness, and legibility of entries as if they were completed by the claimstaker.

(6) Answers to all questions should be carefully read and the claimant should be asked about inconsistencies.

(7) The claimstaker must ensure that all entries are legible and that no abbreviations are used in addresses or in the Liable State's name. Abbreviations that are commonly used in the Agent State have no meaning to Liable States, and abbreviation of the Liable State name may cause claims to be mailed to the wrong State.

(8) The claimant's initial claims filing interview can be conducted either at a desk or a counter. A desk interview is better because of the nature of some questions, i.e., questions concerning the detail reasons for separation and dependents' status are personal and the claimant should be allowed to discuss these in privacy.

(9) The claimstaker is required to consult various documents such as the Handbook, guide questions, and labor market compilations which might be more readily available at a desk than at a counter. However, desk interviews tend to be prolonged beyond the productive exchange of information, and the claimstaker must guard against this tendency through positive control of the content and duration of the interview.

b. Additional Interstate Claims

(1) An additional interstate claim is filed by a claimant who already has an existing benefit year in the Liable State and is taken on the Initial Interstate Claim, Form IB-1.

(2) If the Agent State does not maintain an automated

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Agent State record and has no claim record on file, it should create a claim record for the State at the time of the additional claim.

(3) When the claim form is given to the claimant for completion he/she should be told that the only work history required is that relating to work performed since the last initial claim was filed.

c. Reopened Interstate Claims. A reopened interstate claim filed through the Agent State is taken using the same procedures used for other initial claims, except that there is no intervening employment or separation information to report in the work history portion of the form. This designation is used to advise the Liable State that a benefit year exists and the break in the claims series was not caused by intervening employment, or that there is a change in Agent State, or a transfer from the intrastate to the interstate program is necessary.

d. Continued Interstate Claims. Continued interstate claims forms are provided to claimants at the time of the initial claim in accordance with instructions from the Liable State. Claim forms are mailed by the claimant directly to the Liable State using the forms provided by the Agent State until forms or other claims filing procedures are provided by the Liable State. **Exception:** When a claim is backdated, the claimant is provided with claim forms for the weeks being claimed that ended prior to the date the claim is being taken. The completed claim forms are attached to the initial claim and mailed to the Liable State.

6. Type of Week Used in the Interstate Process

a. The type of week used by the Liable State will be used by claimants filing claims by direct mail to the Liable State.

b. Claims taken by the Agent State should be filed using the calendar week-ending date.

c. When the claimant has earnings during the week, full information should be furnished to the Liable State on all remunerations.

d. Proper allocation of earnings by days will enable the Liable State, if operating on other than a calendar week, to adjust the periods covered by several claims to fit its (the Liable State's) own type of week.

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e. In taking a claim against a Liable State which operates on a different type of week than that of the Agent State, the claimant should be told why the period which may be credited by the Liable State as a week of unemployment may differ from the period covered by the continued claim form and that this difference may cause some delay.

7. Review and Transmittal of Interstate Claims. The following steps are needed to assure adequate review and prompt transmittal of interstate claims:

a. Review

(1) All interstate documents, including claims and subsidiary forms, should be reviewed by an experienced and knowledgeable interstate specialist, especially when procedures are new and personnel are unfamiliar with the processes. As personnel become familiar with procedures, the review may be relaxed to the extent found feasible and consistent with the required quality.

(2) As a minimum, supervisors of the various functions should review a sample of the work, with sample reviews so arranged that each employee's work will be periodically reviewed.

(3) Interstate documents should be reviewed not only for completeness of the document but also for the reasonableness of entries in light of the existing labor market and the claimant's past claim history.

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b. Time of Transmittal

(1) The Agent State should transmit the electronic TC-IB1 and mail all interstate claims forms and related documents to the Liable State on the day the claim is filed. Claims and documents taken at itinerant points, where the claimstaker does not return to the home office on the day the claims are taken, should be transmitted no later than the next day.

(2) Interstate claims materials, even from such itinerant points, should not be held over a week-end or a holiday, before transmittal. In such cases, the hard copy materials should be mailed immediately and the TC-IB1 transmitted the next business day.

(3) If the person performing itinerant services will not be returning to the local office by the following day, claim documents should be mailed directly from the itinerant point to the Liable States.

(4) The appropriate office identification stamp should be placed on all claim documents.

c. Mailing

(1) All interstate claims and related documents should be sent between States by First-Class mail.

(2) Agent State offices with a large volume of interstate claims should maintain various size envelopes pre-addressed to those Liable States to which claims are sent daily. All manila envelopes should have green diamond borders to indicate "First Class Mail". Mailing addresses of interstate processing units are found on Page A of each State's section of the Handbook.

8. Transfer of Agent Interstate Claim Records

No Agent State will transfer its claim record card to another Agent State, but such transfer is desirable between local offices in the same Agent State. When the agent record is established based on the receipt of electronically transferred data from the Liable State, the Agent State should identify the jurisdictional local office or call center in its record. The identification should be changed upon receipt of a new address, as appropriate.

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9. Transient Claimants. A transient claimant is an individual who is temporarily in the area, has a current benefit year in

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the Liable State and is in current claims status. If the claimant does not have an existing benefit year, an initial interstate claim should be filed (see Section II).

With States implementing electronic weeks claimed certifications, it is not likely that very many claimants will report to an Agent State requesting claims forms. However, if such a claimant reports to the Agent State, provide the claimant with Continued Interstate Claim, Form IB-2, annotated as "Transient Claim" in remarks, for a two-week period. If the claimant remains in the area for a longer period of time, an initial interstate claim should be filed.

- a. Type of Information to be Provided on Transient Claim.
Left regular reporting area on _____. Expects to return on _____. Arrived here on _____. Reported to this Office on _____. Will stay until _____. Will go to _____. Because _____. Reason for coming here _____.

- b. Record of Transient Claim. No Agent State claim record is needed for a transient claimant. The Agent State local office should have a record of the transient claim by keeping a list which includes: the claimant's name; social security number; the date the claim was taken; and, identification of the Liable State office where the claim was sent, or a copy of the transient claim filed.

- c. Mailing the Transient Claim. The transient claim should be mailed to the claimant's regular reporting office; that office may be a local office or the interstate Liable office.

10. Itinerant Service

- a. Interstate claims for benefits should be accepted at all points where intrastate claims are accepted.

- b. A claim accepted at an itinerant point should be predated to the first day the claimant would have reported if a full-time claims service were available at the location.

- c. Such predating should be explained under "Remarks" on the claim form.

- d. Special attention must be given to the item in which the

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local office identification stamp will be placed; for claims taken at itinerant points, the frequency of service to the itinerant point must be shown.

e. Special provision should be made to have itinerant-service claims electronically transmitted and documents mailed to the Liable State on the date the claim is taken.

f. The same procedures should be used on the registration for work of interstate claimants at itinerant points as those used for intrastate claimants filing at itinerant points.

11. Canadian Interstate Claims

a. The Handbook should be consulted for special procedural requirements when taking claims against Canada.

b. The interstate claimant's "Record of Employment" should be attached to any new claim filed.

c. The social insurance account number should also be shown on all claim documents.

d. If the "Record of Employment" is not available for attachment to the claim form, the reason should be entered on the claim form, or on a Fact Finding Report, Form IB-11.

12. Backdating Interstate Claims

a. Backdating an initial claim to a date before the first day of the week in which the claim is actually taken must be fully explained in the "Remarks" section and the code indicating that reason entered on the Form IB-1 and the TC-IB1.

b. If backdating is caused by an invalid claim due to an ineligible monetary determination and the claimant agrees with the determination, duplicate claims for weeks claimed must be sent with the backdated Form IB-1.

c. Week-ending dates on duplicate claims should be the same as those on original claims, but the date taken should be the date duplicates were prepared.

d. Regardless of the reason for the backdating, claims should be prepared for all weeks for which the claimant is claiming back credit and they should be attached to the initial

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claim form.

e. Enter the code identifying the reason for backdating on the Form IB-1 and TC-IB1 in the space provided.

13. Reporting Requirements for Interstate Claimants. The usual provision of State laws require claimants to report "as directed" or "in accordance with regulations adopted ____." The Liable State will consider the reporting requirements to have been met by the interstate claimant who reports as follows:

a. Continued Claims Filing. Interstate claimants are required to follow the reporting instructions issued by the Liable State and those issued by the Agent State at the request of the Liable State.

b. Job Service Registration and Placement Services. Interstate claimants are required to observe the same registration and reporting requirements prescribed by the Agent State for intrastate claimants. The Agent State will inform interstate claimants of registration requirements, and the reporting requirements to keep the registration active.

The Job Service should notify the Agent State claims office of failures to register or report of which it is aware. The Agent claims office should notify the Liable State of any potentially disqualifying information it receives from Job Service.

14. Registration for Work by Interstate Claimants. Agent States should be guided by the following:

a. A registration for work is required by most State employment security laws as a condition of eligibility. Some laws are not specific as to the exact definition of "registration for work," and States meet this requirement in various ways. Some States consider a claimant to have registered for work when he/she files a claim. In other States, this requirement is met only if the claimant has filed a full application for work with the placement service of the agency.

b. All States agree, however, that interstate claimants should receive the same placement services as intrastate claimants in the Agent State.

c. All States (as Liable States) also agree that an interstate claimant will be considered as registered for work if

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he/she is registered for work in the Agent State in the same way and to the same extent as the Agent State's intrastate claimants. So an interstate claimant should receive the same treatment with respect to registration for work as he/she would receive as an intrastate claimant.

d. If the Agent State has special registration requirements for certain categories of intrastate claimants, the same special requirements should apply to interstate claimants in the same categories.

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e. If the claim has been taken by the Liable State by telephone, the Agent State should use the claim data provided by the Liable State to create an Agent State record and refer the claimant for Job Service registration, as appropriate.

f. If self-filed or skeleton applications are accepted for certain categories of intrastate claimants, the same type of application should be taken for interstate claimants in the same categories.

g. If intrastate claimants are required to renew their applications for work every 30 days, interstate claimants should be required to do the same.

h. For the purposes of the registration for work requirement, interstate claimants should not be considered to be in a special category.

i. In the placement process, no special consideration should be given to claimants because of their status as interstate claimants.

j. The State agency should not adopt any procedural barriers to the claimant's placement even though placement possibilities may be reduced by the claimant's recent arrival in the community. This does not mean that employer specifications on residence requirements should be ignored, but rather that the Agent State should not adopt any procedure or policy which react against the placement possibilities of interstate claimants.

15. Interstate Active Search for Work Policy

a. Most States require claimants to make an "active search for work."

b. Some States base their requirement on statutory language, while others interpret this requirement into the "able and available" provisions of the law.

c. In either case, the Liable State's interpretation of its requirements is available in its section of the electronic Handbook for Interstate Claimstaking.

d. Most State agencies adopted the following uniform policy statement as their interpretation of this provision as it applies to interstate claimants:

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POLICY STATEMENT ON ACTIVE SEARCH FOR WORK

All interstate benefit claimants shall make such personal efforts to find work as are customarily made by persons in the same occupation who are genuinely interested in obtaining employment.

The phrase "efforts to find work" does not mean a haphazard application for work with a fixed number of employers. It means that the claimant shall use the facilities and methods which are normally used by persons in his occupation when seeking work. Information concerning the facilities and methods that are available to the individual claimant and the claimant's use of such facilities shall be transmitted to the Liable State. Appropriate specific action by the claimant, including action supplementing the efforts of the Employment Service to find work for him, will be required if any one of the following conditions exist.

- A. The area in which he resides is not within the service radius of a full-time employment office, or
- B. He is seeking suitable work in an occupation in which jobs are normally filled through channels other than the State Employment Service, such as jobs which are usually filled through trade unions or professional societies, or
- C. The employment prospects in the claimant's occupation in the area where he is claiming are sufficiently favorable to justify an opinion by the Agent State local office that personal efforts by the claimant to find work have reasonable probability of success. As a claimant's length of unemployment increases and he has been unable to find work in his customary occupation, he may be required to seek work in some other occupation in which job openings exist, or, if that does not seem likely to result in employment, he may be required to accept counseling for possible retraining or a change in occupation.

16. Application of the Policy Statement

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a. Claimstakers will inform claimants of their rights and responsibilities in claiming unemployment insurance. Since an active search for work is one of the claimants responsibilities, the claimant must be told how to meet this requirement.

A claimant does not meet this requirement through a "haphazard application for work with a fixed number of employers." In many instances this would waste the time of the claimant and employers, and not test the claimant's attachment to the labor market.

b. The Agent State must not instruct the claimant to engage in an unreasonable work search when there is no basis for believing that such actions would result in probable employment. A claimant should not be asked to pursue a given course of actions merely to "test" a claimant's willingness to follow instructions. Therefore, the Agent State should:

(1) Know the composition of the local labor market, the hiring practices of the employers, and methods usually followed by persons trying to obtain employment in that labor market area;

(2) Instruct the claimant how to make an "active search for work,"

(3) Upon request, evaluate and report to the Liable State on the claimant's actions to fulfill this requirement.

17. Advising Claimants of their Responsibilities

a. When a claimant files an initial claim for benefits in the Agent State, the claimstaker should review the Liable State's section of the electronic Handbook and advise the claimant of the work search requirements to establish and maintain eligibility for benefits.

b. Claimants should be told to keep a personal record of work search contacts for future reference, even if the contact was listed on the weekly certification form. Claimants should be told that they will need this information to complete Eligibility Review forms that may be sent to them by the Liable State.

The claimant's record should include: date of contact; type of contact (new or follow-up); method of contact (in person, phone, etc.); type of work sought; name of firm; address of firm; name